PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

appropriate. All further correspondence including the Patent, advance orders and no	1 PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where suffication of maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a new correspondence address; and a new correspondence address and a new correspon
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional papers which as an assignment of formal drawing must be accompanied to the control of the contro

34704 7590 07/28/2009 BACHMAN & LAPOINTE, P.C. 900 CHAPEL STREET **SUITE 1201**

NEW HAVEN, CT 06510

have its own certificate of mailing or transmission. Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name (Signature (Da

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/576,836	04/18/2006	Pengju Kang	PA-000.05224-US	2285
TITLE OF INVENTION: REID AND LOW RESOLUTION CCD SENSOR BASED POSITIONING SYSTEM			(03-293)	

APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE \$1510 \$300 \$0 \$1810 10/28/2009 nonprovisional NO ART UNIT CLASS-SUBCLASS EXAMINER COLON SANTANA, EDUARDO 2837 187-391000 Change of correspondence address or indication of "Fee Address" (37 °R 1.363). 2. For printing on the patent front page, list BACHMAN & LaPOINTE, P.C. (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer listed, no name will be printed. Number is required. 3 ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) OTIS ELEVATOR COMPANY FARMINGTON, CONNECTICUT

Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🚨 Corporation or other private group entity 🖵 Government

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

4a. The following fee(s) are submitted: S Issue Fee A check is enclosed.

Payment by credit card. Form PTO-2038 is attached. Publication Fee (No small entity discount permitted) The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 2-0184 (enclose an extra copy of this form). Advance Order - # of Copies

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature /Barry L. Kelmachter #29999/ August 27, 2009 Date Typed or printed name Barry L. Kelmachter

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 33 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and admitting the complete of th

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Registration No.